REAL WORLD TESTING RESULTS

GENERAL INFORMATION

Report ID Number	20221206wel
Developer Name	Welligent, Part of the ContinuumCloud
Product Name(s)	Welligent
Version Number(s)	8MU3
Certified Health IT Product List (CHPL) ID(s)	15.02.05.2536.WELL.01.01.1.220201
Developer Real World Testing PLAN Page URL	https://welligent.com/solutions/meaningful-health/
Developer Real World Testing RESULTS Page URL	https://welligent.com/solutions/meaningful-health/

CHANGES TO ORIGINAL PLAN

Summary of Change	Reason	Impact
All CCDAs were sent via ITI protocol.	Welligent does not currently have trading partners using DIRECT as a mode of transmission	No measurable impact. Currently evaluating trading partners who send and receive DIRECT messages.
Final testing completed in 1st quarter 2024	Staff attrition, and resulting loss of expertise, delayed testing. We resolved this issue by partnering with Dynamic Health to capitalize on their expertise in guiding our RWT certification and documentation	No measurable impact. Established a testing plan for 2024 RWT.

SUMMARY OF TESTING METHODS AND KEY FINDINGS

Our current interoperability functionality has improved collaboration in patient care. We will continue to pursue trading partners who use DIRECT messaging.

Current trading partners have not expressed the need for FHIR® integration. We continue to move forward with integration (in our production environment) to better support interoperability and certification requirements.

Current trading partners are not using specific data exports implemented for ONC certification. Functionality has been tested utilizing the ONC test script.

RWT methods used:

- Visual validation
- ITI transmission of CCDAs
- C-CDA scorecard
- FHIR upload to PHR app

STANDARDS UPDATES (INCLUDING STANDARDS VERSION ADVANCEMENT PROCESS (SVAP) AND UNITED STATES CORE DATA FOR INTEROPERABILITY (USCDI))

____ Yes, I have products certified with voluntary SVAP or USCDI standards. (If yes, please complete the table below).
__X__ No, none of my products include these voluntary standards

Standard (and version)	
Updated certification criteria and associated product	
Health IT Module CHPL ID	
Conformance measure	

Care Setting(s)

The expectation is that a developer's Real World Testing is conducted within each type of clinical setting in which their certified health IT is marketed. Health IT developers are not required to test their certified health IT in every setting in which it is marketed for use.

List each care setting that was tested.

Ambulatory Care

Metrics and Outcomes - Care Coordination: Transitions of Care

Measurement /Metric	Relied Upon Software (if applicable)	Associated Criterion(a)	Outcomes	Challenges Encountered (if applicable)
Outbound TOC's received by HISP: 100 percent of outbound TOC's successfully received by HISP	ConnectEHR	170.315(b)(1) Transition of Care (Cures Update)	99.95 % of the TOC CCDs (version 1.1) sent during the measurement period were received by HIEs we report to.	The HIEs that receive the TOC CCD messages did not accept DIRECT messaging. All CCDAs were sent to HIEs via ITI protocol and associated webservices.

C-CDA scorecard: Average C-CDA grade from scorecard for C-CDAs generated from ConnectEHR is a “C” or better	ConnectEHR	170.315(b)(1) Transition of Care (Cures Update)	Average grade of C was accomplished.	
C-CDA’s flagged as restricted received flagged as restricted per the trading partner : 75 percent of C-CDAs flagged as restricted were received in restricted status based on confirmed receipt from trading partner	ConnectEHR	170.315(b)(1) Transition of Care (Cures Update)	CCDs during the measurement period were all created using version 1.1 and accepted by HIEs that we report to	
Trading Partner’s TOC C-CDAs received by ConnectEHR: 75 percent of trading partner's TOC C-CDAs successfully received by ConnectEHR.	MaxMD	170.315(h)(1) Direct Project	Successfully sent and received DIRECT messaging with trading partner using evaluation accounts.	We currently do not have trading partners using DIRECT as a mode of transmission.

KEY MILESTONES

Key Milestones–
170.315(b)(1) Transition of Care (Cures Update)
170.315(h)(1) Direct Project

Key Milestone	Care Setting	Date/Timeframe
• Confirm Trading Partner • Confirm ability to send and receive clinical documents • Confirm with TP that production data will be used, whether in an actual live environment or a copy of a live environment	Ambulatory Care	January, 2024
• Care provider selects recipient from directory of Direct addresses and initiates sending of Clinical Document. The user is able to create a C-CDA Release 2.1 that also includes the reason for referral, and the referring or transitioning provider's name and office contact information. • C-CDA Care Referral or Referral Note is triggered to send via Direct Protocol Care provider reviews the Direct Status screen (under Direct Outgoing menu choice) to ensure Clinical Document was successfully transmitted.	Ambulatory Care	January, 2024
Recipient uses scorecard to grade C-CDA	Ambulatory Care	January, 2024
Tester uses Document Center to locate Clinical Document. • Care provider reviews the Direct Status screen (under Direct Outgoing menu choice). • • Recipient validates that Social History section of C-CDA is flagged as restricted	Ambulatory Care	January, 2024

Metrics and Outcomes – Care Coordination: Clinical information reconciliation and incorporation

Measurement /Metric	Relied Upon Software (if applicable	Associated Criteria	Outcomes	Challenges Encountered (if applicable)
Patient Data Matching & Patient Data Reconciliation: 100 Percent of patient data can be matched to an existing patient. Ability to	ConnectEHR	170.315(b)(2) Clinical information reconciliation and incorporation	Successfully matched and reconciled existing patient data.	

reconcile data for an existing patient				

Key Milestones– 170.315(b)(2) Clinical information reconciliation and incorporation

Key Milestone	Care Setting	Date/Timeframe
Import live patient data	Ambulatory Care	January, 2024
Confirm role access limits	Ambulatory Care	January, 2024
Verify imported data matches existing client	Ambulatory Care	January, 2024
Reconcile imported allergy, medication, and problem data with existing data	Ambulatory Care	January, 2024

Metrics and Outcomes – Care Coordination: Data export

Measurement /Metric	Relied-upon Softawre	Associated Criterion(a)	Outcomes	Challenges Encountered (if applicable)
Exports Accurate Timing: 100 Percent of Exports ran at the correct time.		170.315(b)(6) Data export	100% of the exports ran at the correct time	
C-CDA Accuracy: C-CDA count matches actual patient count for requested date range.		170.315(b)(6) Data export	All C-CDA counts matched actual patient count for requested date range.	
Random C-CDA Scorecard: Spot-checked C-CDAs pass scorecard with average overall grade of “C” or better		170.315(b)(6) Data export	All CCDAs created in batch export were tested using the ONC scorecard and received a grade of “C” or better.	

Key Milestones– 170.315(b)(6) Data export

Key Milestone	Care Setting	Date/Timeframe
Generate export file	Ambulatory Care	January, 2024

Use the Edge Test Tool to check validity of output file	Ambulatory Care	January, 2024
Export summary was created and completed successfully	Ambulatory Care	January, 2024
Calculate and compile metrics	Ambulatory Care	January, 2024

Metrics and Outcomes – Application Program Interface: patient selection, data category request, all data request

Measurement /Metric	Relied Upon Software (if applicable)	Associated Criterion(a)	Outcomes	Challenges Encountered (if applicable)
PHR Access: Patient is able to retrieve FHIR API data from PHR app for 100 percent of encounters.	Dynamic FHIR API	170.315(g)(7) Application access— patient selection 170.315(g)(9) Application access— all data request	FHIR API - 100% of encounters were confirmed for all test patients.	Test patients were used because FHIR functionality is not yet part of our production environment (due to lack of customer need/adoption). Plan is to phase in FHIR to our production environment so that production data is available for future RWT.
PHR Data Accuracy: In 100 percent of encounters from Step #1, PHR data matches data from EHR. This will be confirmed by visual validation of the following FHIR resources: • Demographics • Problems • Medications • Allergies	Dynamic FHIR API	170.315(g)(7) Application access— patient selection 170.315(g)(9) Application access— all data request	PHR DATA MATCHES – Visually validated 100% of test patients.	Test patients were used because FHIR functionality is not yet part of our production environment (due to lack of customer need/adoption).

Key Milestones:
170.315(g)(7) Application access— patient selection
170.315(g)(9) Application access— all data request

Key Milestone	Care Setting	Date/Timeframe
• Partner with PHR or identify existing PHR that can receive patient clinical data as described in this RWT plan.	Ambulatory Care	January, 2024

• Ensure that PHR has functionality to access the Dynamic FHIR API, as described here. • Partner with EHR that is integrated with the Dynamic FHIR API and Patient Portal modules of ConnectEHR.		
Encounter is created and visually confirmed	Ambulatory Care	January, 2024
• Dynamic FHIR API has transformed C-CDA into FHIR resources. • PHR app consumes FHIR resources to populate EHR data	Ambulatory Care	January, 2024
Visually validate Assessment, Plan of Treatment and Health Concerns narrative text	Ambulatory Care	January, 2024